

CLAIMS ONLY						SERIAL NO.	FILING DATE				
						APPLICANT(S)					
CLAIMS											
	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT			*	*	*	
	IND.	DEP.	IND.	DEP.	IND.	DEP.		IND.	DEP.	IND.	DEP.
1	/						51				
2		/					52				
3			/				53				
4		/					54				
5		/					55				
6	/						56				
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43							93				
44							94				
45							95				
46							96				
47							97				
48							98				
49							99				
50							100				
TOTAL IND.	/						TOTAL IND.				
TOTAL DEP.		/					TOTAL DEP.				
TOTAL CLAIMS	/						TOTAL CLAIMS				

** MAY BE USED FOR ADDITIONAL CLAIMS OR AMENDMENTS*

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